



Atty. Dckt. No. 1391-38601

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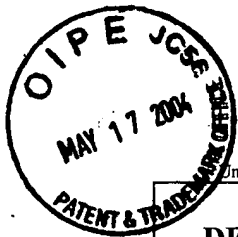
**DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING  
AN APPLICATION DATA SHEET (37 CFR 1.76)**

<b>Title of Invention</b>	Electric Downhole Safety Valve
As below named inventor(s), I/we declare that:	
This declaration is directed to:	
<input type="checkbox"/> The attached application, or	
<input checked="" type="checkbox"/> Application No. 10/748,515, filed on December 30, 2003.	
<input type="checkbox"/> as amended on _____ (if applicable);	
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;	
I/we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;	
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.	
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.	


<b>FULL NAME OF INVENTOR(S)</b>	
Inventor one: James C. P. Waithman	Date: <u>4/2</u> , 2004
Signature: <u>J. Waithman</u>	Citizen of: U.K.
Inventor two: William D. Loth	Date: _____, 2004
Signature: <u>signed on separate sheet</u>	Citizen of: U.K.
Inventor three:	Date: _____, 2004
Signature: _____	Citizen of: _____
Inventor four:	Date: _____, 2004
Signature: _____	Citizen of: _____
<input type="checkbox"/> Additional inventors are being named on _____ additional form(s) attached hereto.	

This collection of information is required by 35 U.S.C. 115 and CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1 minute to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

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<b>FULL NAME OF INVENTOR(S)</b>	
Inventor one: James C. P. Waithman	Date: _____, 2004
Signature: <u>signed on separate sheet</u>	Citizen of: U.S.
Inventor two: William D. Loth	Date: <u>April 5</u> , 2004
Signature: 	Citizen of: <del>U.S.</del> <u>US</u>
Inventor three:	Date: _____, 2004
Signature:	Citizen of:
Inventor four:	Date: _____, 2004
Signature:	Citizen of:
<input type="checkbox"/> Additional inventors are being named on _____ additional form(s) attached hereto.	

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**POWER OF ATTORNEY  
And  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	10/748,515
Filing Date	December 30, 2003
First Named Inventor	James C. P. Waithman
Title	Electric Downhole Safety..
Art Unit	
Examiner Name	
Attorney Docket Number	1391-38601

I hereby appoint:

☒ Practitioners at Customer Number

→ 23505

**OR**☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the corresponding address for the above-identified application to:

☐ The above-mentioned Customer Number.**OR**☐ The address associated with Customer Number**OR**

Firm or:		
<input type="checkbox"/> Individual Name		
Address		
Address		
City	State	Zip
Country		
Telephone	Fax	

I am the:

☒ Applicant/inventor.

Under 37 CFR 3.73(b) Assignee certifies that it is:

☐ Assignee of record of the entire interest. See 37 CFR 3.71. *Statement under 37 CFR 3.73(b) is enclosed.**(Form PTO/SB/96). )OR [if you have a recorded Assignment delete previous "See 37 sentences & use this):**Assignment Recorded , 2002 at Reel/Frame***SIGNATURE of Applicant or Assignee of Record**

Name	William D. Loth		
Signature			
Date	April 5, 2004	Telephone:	713-260-345

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) and application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

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Attorney Docket Number	1391-38601

I hereby appoint:

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**OR**☐ Practitioner(s) named below:

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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the corresponding address for the above-identified application to:

☐ The above-mentioned Customer Number.**OR**☐ The address associated with Customer Number**OR**

Firm or

☐ Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/inventor.

Under 37 CFR 3.73(b) Assignee certifies that it is:

☐ Assignee of record of the entire interest. See 37 CFR 3.71. *Statement under 37 CFR 3.73(b) is enclosed.**(Form PTO/SB/96). ) OR [if you have a recorded Assignment delete previous "See 37 sentences & use this):*  
*Assignment Recorded* , 2002 at Reel/Frame .**SIGNATURE of Applicant or Assignee of Record**

Name	James C.P. Waithman
Signature	<i>J Waithman</i>
Date	4/2, 2004
Telephone:	713 260 3149

**NOTE:** Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.☒ \*Total of 1 forms are submitted.

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